

As the below named inventor(s), I/we declare that:

This declaration is directed to:



Docket No. 0217.99

PTO/SB/01A (10-00) Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

☑ The attached application, or								
☐ Application No	_ , filed on,							
☐ as amended on		(if applicable);						
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;								
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;								
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and								
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.								
		<u>-</u>						
FULL NAME OF INVENTOR(S)								
, ,								
FULL NAME OF INVENTOR(S) Inventor one: Guadalupe M. Rojas Signature: Alachelic	Citizen of:	Mexico						
Inventor one: Guadalupe M. Rojas Signature: Juan A. Morales-Ramos	Citizen of:	Mexico						
Inventor one: Guadalupe M. Rojas Signature: Juan A. Morales-Ramos		Mexico Mexico						
Signature:								
Inventor one: Guadalupe M. Rojas Signature: Juan A. Morales-Ramos Signature:	Citizen of:							
Inventor one: Guadalupe M. Rojas Signature: Juan A. Morales-Ramos Signature: David R. Nimocks, III	Citizen of:	Mexico						
Inventor one: Guadalupe M. Rojas Signature: Juan A. Morales-Ramos Signature: David R. Nimocks, III Signature:	Citizen of:	Mexico						

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





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PTO/SB/81 (10-00)

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		Application Number			*		
POWER OF ATTORNEY OR		Filing Date		1			
		First Named Inventor		Guadalupe M. Rojas			
AUTHORIZA	TION OF AGENT	Group A	t Unit				
		Examine	r Name		·		
	<u>.</u>	Attorney	Docket Number	0217.99			
I hereby appoint:	_						
	Customer Number		5740				
OR □ Practitioner(s) n	named helow:	4	25712				
- Traditioner(3)	amed below.						
	Name	Registration		Number			
as my/our attorr	ney(s) or agent(s) to prosecu	te the ap	olication identifie	d above, a	nd to transact all		
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Telephone		Fax					
I am the:							
☑ Applicant/Invent	tor.						
□ Assignee of record of the entire interest. See 37 CFR 3.71.							
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
SIGNATURE of Applicant or Assignee of Record							
Name	Guadalupe M. Rojas						
Signature							
Date	12-18-2000						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
⊠ *Total of 3 forms are submitted.							

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number.			·			
	Application	Number				
POWER OF ATTORNEY OR	Filing Date					
	First Named Inventor		Guadalupe M. Rojas			
AUTHORIZATION OF AGENT	Group Art Unit					
	Examiner Name					
	Attorney D	ocket Number	0217.99			
I hereby appoint:	*					
Practitioners at Customer Number						
OR □ Practitioner(s) named below:) named below:					
Traduction(3) named below.						
Name	Registration Number					
						
· · · · · · · · · · · · · · · · · · ·						
as my/our attorney(s) or agent(s) to prosecu	te the appli	cation identified	d above, an	d to transact all		
business in the United States Patent and Tra	ademark Of	fice connected	therewith.			
Please change the correspondence address for	the above-i	dentified applic	ation to:			
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OR						
□Firm <i>or</i> Individual Name						
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Address						
City	State			Zip		
Country			•			
Telephone	Fax					
I am the:						
		•				
- 						
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name Juan A. Morales-Ramos						
Signature						
Date 12/1	12/18/2000					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
☑ *Total of <u>3</u> forms are submitted.						

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